

REPORT ANALYSIS DATA		1. SSIC NUMBER	2. REPORT CONTROL SYMBOL
3. TITLE OF REPORT			
4. PURPOSE OF REPORT			
5. REQUIRING DIRECTIVE(S) <i>(List all that apply)</i>		6. FREQUENCY OF REPORT <input type="checkbox"/> DAILY <input type="checkbox"/> QUARTERLY <input type="checkbox"/> ONE TIME <input type="checkbox"/> WEEKLY <input type="checkbox"/> SEMI-ANNUALLY <input type="checkbox"/> SITUATIONAL <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/> _____	
7. REPORT FORMAT <input type="checkbox"/> MESSAGE <input type="checkbox"/> LETTER <input type="checkbox"/> FORM <i>(Attach copy)</i>		8. IS REPORT SUBJECT TO MINIMIZE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE	
9. METHOD OF PREPARATION <input type="checkbox"/> ADPE <input type="checkbox"/> TYPEWRITER <input type="checkbox"/> MANUAL <input type="checkbox"/> _____		10. IS REPORT ENTERED INTO AN ADP SYSTEM? <input type="checkbox"/> NO <input type="checkbox"/> YES <i>(list name and location of system)</i>	
11. WHO USES COMPLETED REPORT? <i>(list by command, OP code, etc.)</i>			
12. THIS REPORT IS COMPLETED BY <input type="checkbox"/> OPERATING FORCES <i>(SNDL Part 1)</i> <input type="checkbox"/> SHORE ESTABLISHMENT <i>(SNDL Part 2)</i> IF COMPLETED BY OPERATING FORCES, ARE FLEET CINC COMMENTS ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO			
13. RESPONDENTS	A. LIST RESPONDING COMMANDS BY A COLLECTIVE TERM OR BY NAME <i>(FOR EXAMPLE: FLTCINCS, TYCOMS, NAVAL LABS, ALL LEGSERVOFF, CRUITSTAS, AREA COORDINATORS, ALL OPER AVIATION SQUADRONS, ALL SUBMARINES, ALL SSN, ALL SURFACE SHIPS, MAJOR CLAIMANTS, ALL SHOREACTS W/BEQ/BOQ, ALL COMDS W/DENTISTS, ALL S&S W/MEDPERS, SYSCOMS, COMDS W/GEN MESS, ALL S&S, ALL COMDS W/CIVILIANS, ALL OVS COMDS, ALL ECHELON 2 COMDS)</i>	(1) OPERATING FORCES <i>(SNDL Part 1)</i>	(2) SHORE ESTABLISHMENT <i>(SNDL Part 2)</i>
	B. TOTAL NUMBER OF RESPONDENTS	(1)	(2)
	C. TOTAL COST TO PREPARE AND SUBMIT THIS REPORT <i>(from reverse)</i>	(1)	(2)
14. ACTION OFFICER	A. NAME, RANK/RATE/GRADE AND TITLE		B. ACTIVITY NAME AND ADDRESS <i>(include room no.)</i>
	C. SIGNATURE	D. DATE	E. PHONE NO.

Use this worksheet for estimating the total cost to prepare and submit this report. Compute two costs-one for operating forces and one for shore establishments. The hourly rate may be taken from any current pay chart.

OPERATING FORCES COSTS TO PREPARE AND SUBMIT

PAY GRADE	NO. HOURS SPENT	X HOURLY RATE	= PERSONNEL COSTS	+ 25% OVERHEAD	= TOTAL COSTS BY PAY GRADE
Total Cost to Prepare and Submit One Report: \$ _____					
X _____ Commands Required to Submit =					\$ _____
X _____ Reports per Year =					\$ _____
Total Cost to Prepare and Submit					* \$ _____
* Enter this figure in column 13(c)(1)					

SHORE ESTABLISHMENT COSTS TO PREPARE AND SUBMIT

PAY GRADE	NO. HOURS SPENT	X HOURLY RATE	= PERSONNEL COSTS	+ 25% OVERHEAD	= TOTAL COSTS BY PAY GRADE
Total Cost to Prepare and Submit One Report: \$ _____					
X _____ Commands Required to Submit =					\$ _____
X _____ Reports per Year =					\$ _____
Total Cost to Prepare and Submit					** \$ _____
** Enter this figure in column 13(c)(2)					

SAMPLE COMPUTATION (SALARIES ARE NOT ACCURATE)

PAY GRADE	NO. HOURS SPENT	X HOURLY RATE	= PERSONNEL COSTS	+ 25% OVERHEAD	= TOTAL COSTS BY PAY GRADE
O-2 (Note 1)	.25	7.45	1.86	0.47	2.33
E-8 (Note 2)	3	7.45	22.35	5.59	27.94
GS-4 (Note 3)	1	4.77	4.77	1.19	5.96
Total Cost to Prepare and Submit One Report \$ 36.23					
X 4 Commands Required to Submit =					\$ 144.97
X 4 Reports per Year =					579.68
Total Cost to Prepare and Submit					\$ 579.68

Note 1: Reviews and signs report.

Note 2: Collects required information: prepares chart: writes report.

Note 3: Types and mails report.